

CHARLES J. DIVEN, JR., ESQ.  
ATTORNEY AT LAW

MEMO ENDORSED

February 26, 2008

United States District Court Judge  
300 Quarropas Street  
White Plains, New York 10601  
Attn: Hon. Kenneth M. Karas

By Fax only 914-390-4152

USDS SDNY  
DOCUMENT  
ELECTRONICALLY FILED  
DOC #: \_\_\_\_\_  
DATE FILED: \_\_\_\_\_

Re: **United States v Henry P. Steeneck**

Your Honor:

Consistent with the outline for treatment provided by Dr. Rosner during our telephone conference, a follow-up CT Scan has been scheduled for Mr. Steeneck at 2PM on February 27, 2008 at the Hudson Valley Hospital Center in Cortlandt Manor New York. Herewith, please find a letter from Dr. Rosner in confirmation as well as an appointment confirmation at the facility.

I would therefore, respectfully request that an Order issue allowing for Mr. Steeneck's release on February 27, 2008 from 12:00PM to 4:00PM with the same conditions as set forth in the previous Order of medical release.

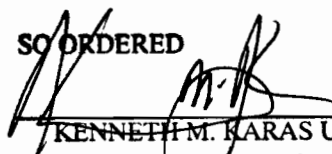
Sincerely,

  
Charles J. Diven, Jr., Esq.

cc: AUSA Richard Tarlowe, by fax only 914-993-1980  
Scott Kowal, US Pretrial Services by fax only 914-390-4035

THE CLERK OF COURT IS  
RESPECTFULLY REQUESTED  
TO DOCKET THIS LETTER  
AND ITS ATTACHMENTS.

SO ORDERED

  
KENNETH M. KARAS U.S.D.J.  
DATED: FEBRUARY 26, 2008

**SARAN S. ROSNER, M.D., P.C.**  
**NEUROLOGICAL SURGERY**  
245 Saw Mill River Rd., Suite 101  
Hawthorne, N.Y. 10532  

---

(914) 741-2666

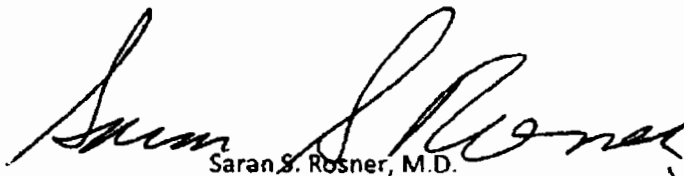
February 22, 2008

Dear Judge Karas:

I re-programmed Mr. Steeneck's valve today. A follow-up CT scan of the head needs to be completed in 3 - 5 days, for reasons outlined to you earlier. This scan should be performed at Hudson Valley Hospital Center so that reliable comparison to previous studies can be made.

Your kind attention to this matter is appreciated.

Sincerely,

  
Saran S. Rosner, M.D.

FROM 9144552945

TO: 94552945

FEB-25-2008 14:51 FROM: ROSNER MD &amp; ROBBINS 7412869

P.1/1



Maurice R. Poplasky, MD  
Paul H. Kim, M.D.  
Elliott H. Summers, M.D.  
Daniel Solomon, M.D.  
Han J. Kim, M.D.

1980 CROMPOND ROAD  
CORTLANDT MANOR, NY 10567  
914-734-3674  
Fax 914-734-3678 www.hvhc.org

Hudson Valley Hospital Center Breast Care Imaging Centers, additional locations:  
Waterside Diagnostic Imaging - Waterside Professional Park, Putnam Valley, NY 914-528-6820  
Croton Diagnostic Imaging - 35 South Riverside Ave., Croton-on-Hudson, NY 914-271-9481

PATIENT'S NAME

REFERRING PHYSICIAN

FAX #

REASON FOR EXAM:

Henry Sturrock Jr

DR. S. Rosner 741-2666

914-741-2869

2:00 PM

2-27-08

CD-9 CODE

## ULTRA SOUND

- ☐ Abdomen  
☐ Bladder  
☐ Carotid  
☐ Echo Cardio  
☐ Extremity ☐ LQR  
☐ Scrotum  
☐ Pelvis  
☐ TV Peivis  
☐ Pregnancy  
☐ Renal  
☐ Testes  
☐ Thyroid ☐ LQR  
☐ Breast ☐ LQR

- ☐ Arterial Doppler/☐ Upper ☐ Lower  
☐ Venous Doppler  
☐ Fetal Bio-Physical Profile  
☐ Breast Cyst Aspiration ☐ LQR  
☐ Thoracentesis  
☐ Biopsy  
☐ TEE  
☐ Other

## MRI NEURO

- ☐ Brain ☐ Pituitary  
☐ Orbits ☐ Sinuses  
☐ Internal Auditory Canal  
☐ Temporo-Mandibular Joint ☐ LQR  
☐ C-Spine  
☐ T-Spine  
☐ L-Spine  
☐ Spine Survey  
☐ Neck (Soft Tissue)  
☐ Brachial Plexus  
☐ MRA Carotid  
☐ MRA Cranial (Circle of Willis)  
☐ Other

## MRI BODY

- ☐ Chest ☐ Sternum  
☐ Aorta  
☐ Abdomen ☐ Liver  
☐ Renal ☐ Pancreas  
☐ Breast ☐ Implants ☐ LQR  
☐ Pelvis  
☐ MRCP  
☐ MRA Aorta  
☐ MRA Renal  
☐ MRA Peripheral Run Off  
☐ MRA Venogram (Specify)  
☐ Other  
☐ W ☐ W/O ☐ W & W/O

## MRI ORTHO

- ☐ Shoulder ☐ Scapula ☐ LQR  
☐ Upper Extrem ☐ LQR  
☐ Elbow ☐ LQR  
☐ Wrist ☐ LQR  
☐ Hand ☐ LQR  
☐ MRA Upper Extrem ☐ LQR  
☐ Hip ☐ LQR  
☐ Lower Extrem ☐ LQR  
☐ Knee ☐ LQR  
☐ Ankle ☐ LQR  
☐ Foot ☐ LQR  
☐ Arthrogram ☐ LQR  
☐ Other ☐ LQR

## CAT SCAN

- ☐ Other  
☐ Head  
☐ Sinuses  
☐ Orbits  
☐ Sella  
☐ IAC  
☐ Facial  
☐ Neck  
☐ C-Spine  
☐ T-Spine  
☐ L-Spine  
☐ Up Extrem ☐ w ☐ w/o ☐ w & w/o  
☐ Low Extrem ☐ w ☐ w/o ☐ w & w/o  
☐ Chest ☐ w ☐ w/o ☐ w & w/o  
☐ Abdomen ☐ w ☐ w/o ☐ w & w/o  
☐ Pelvis ☐ w ☐ w/o ☐ w & w/o  
☐ Appendix ☐ w/o  
☐ Renal Stone ☐ w/o  
☐ CTA Head  
☐ CTA Neck  
☐ CTA Chest  
☐ CTA Abdomen  
☐ CTA Peripheral Run Off  
☐ CTA Other

## VIRTUAL EXAM

- ☐ Lung Screening  
☐ Abdomen Screening  
☐ Full Body Screening  
☐ Cardiac Scoring  
☐ Virtual Colonography  
☐ Other Screening

## X-RAY

- ☐ Skull  
☐ Orbits  
☐ Eye FB  
☐ Sinuses  
☐ Facial Bones  
☐ Nasal Bones  
☐ Mandible  
☐ Shoulder ☐ RQL  
☐ Scapula ☐ RQL  
☐ Clavicle ☐ RQL  
☐ AC Joints ☐ RQL  
☐ Humerous ☐ RQL  
☐ Forearm ☐ RQL  
☐ Wrist ☐ RQL  
☐ Hand ☐ RQL  
☐ Finger ☐ RQL  
☐ C-Spine  
☐ ST Neck  
☐ T-Spine  
☐ L-Spine  
☐ Sacrum-Coccyx  
☐ Flex/Extend  
☐ Scoliosis  
☐ Skeletal Survey  
☐ Bone Age  
☐ Bone Length  
☐ Pelvis  
☐ Hip ☐ RQL  
☐ Femur ☐ RQL  
☐ Knee ☐ RQL  
☐ Knee Standing ☐ RQL  
☐ Tib Fib ☐ RQL  
☐ Ankle ☐ RQL  
☐ Foot ☐ RQL  
☐ Toe ☐ RQL  
☐ Chest  
☐ Sternum  
☐ SC Joints  
☐ Ribs  
☐ KUB  
☐ Abdomen  
☐ Skeletal Survey  
☐ Bone Age  
☐ Bone Length  
☐ Obstructive Series

## NUCLEAR MEDICINE

- ☐ Biliary  
☐ Bone Scan  
☐ Gastric Emptying  
☐ Lung Vent/Perf.  
☐ PY Test  
☐ Renal ☐ w-Lasix ☐ w/o Lasix  
☐ Sentinel Node  
☐ Thyroid  
☐ Gallium/Soft Tissue/WBC-Indium  
☐ Pharmacology/Stress Test  
☐ Exercise Stress Test  
☐ Regular Stress Test  
☐ Other  
☐ PET SCAN Full Body

## MAMMOGRAPHY

- ☐ Screening  
☐ Diagnostic ☐ R ☐ L ☐ Bilat

## DEXA-BONE DENSITY

## FLUOROSCOPY

- ☐ Barium Swallow ☐ VCUG  
☐ Upper GI ☐ Retro Urethrogram  
☐ Upper GI / SB ☐ HSG  
☐ Small Bowel ☐ Myelogram  
☐ Barium Enema ☐ Arthrogram  
☐ Barium Enema/Air ☐ Angiography  
☐ IVP  
☐ Cystogram  
☐ Specify

Special comments to the Radiologist:

Compare to previous

Doctor's Signature

Directions and patient's exam preparations on back